Please type	a p	olus	sign	(+)	inside this box	_	﴾	+

PTO/SB/01 (10-00) Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

			_			
Attorney Docket Nun	nber	1300-016				
First Named Inventor	r	Horton				
COMPLETE IF		KNOWN				
Application Number						
Filing Date N		ovember 09, 2001				
Group Art Unit						
Examiner Name						

		1.014					
As a below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
UV PORTAL-BASED APPLIANCES AND CONTAINERS							
the specification of which	(T	itle of the Invention)					
is attached hereto							
OR		as United St	tates Application I	Number or PCT International			
☐ was filed on (MM/DD/YYYY)				(if applicable).			
Application Number	and was a	mended on (MM/DD/YY	YY)				
I hereby state that I have reviewed amended by any amendment spe	d and understand the co	ontents of the above ider re.	ntified specification	n, including the claims, as			
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Foreign Filing Date Priority Certified Copy Atta Country (MM/DD/YYYY) Not Claimed YES NO						
			0000	0000			
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s)	Application Number(s)  Filing Date (MM/DD/YYYY)  Additional provisional a numbers are listed on a supplemental priority da PTO/SB/02B attached in the provisional and numbers are listed on a supplemental priority da PTO/SB/02B attached in the provisional and numbers are listed on a supplemental priority da PTO/SB/02B attached in the provisional and numbers are listed on a supplemental priority days.						
	1						

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

The state of the s

) #k ısk

Please type a plus sign (+) inside this box 

+ 

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

						· · · · · · · · · · · · · · · · · · ·	
Direct all correspondence to: Customer Number or Bar Code Label OR							
Name  23485  PATENT & TRADEMARK OFFICE							
Address							
Address			, .				
City		State		ZIP			
Country						Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INV	ENTOR:			A petition	on has been fil	ed for this unsigned inventor	
Given Name Isaac B.  (first and middle [if any])  Family Name Horton, III  or Surname						, 111	
Inventor's Successful from Inc.  Date     g   0							
Residence: City Raleigh State N					USA Country	Citizenship USA	
Mailing Address 8824 Stage F	ord Road	1					
Mailing Address							
<sub>city</sub> Raleigh	State NC			27615		Country USA	
NAME OF SECOND INVENTOR:     A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature Date							
Residence: City State				Country	Citizenship		
Mailing Address							
Mailing Address							
City State :				ZIP Country			
☐ Additional inventors are being named	☐ Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						

A STATE OF THE STA

11 48

: 52

PTO/SB/81 (10-00)

Approved for use through 10/31/2002 OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	
Filing Date	November 09, 2001
First Named Inventor	Horton
Group Art Unit	
Examiner Name	
Attorney Docket Number	1300-016

I hereby appoir	nt:					
XX Practitions	ers at Customer Number	23485		<b></b>	Place Customer Number Beo Obde Pastowski magemark office	
——————————————————————————————————————	er(s) named below:					
	Name			Registrat	tion Number	
			-			
			-			
			+-	<del></del>		
				, ,		
as my/our attorn business in the l	ey(s) or agent(s) to prosect United States Patent and Tr	ute the application rademark Office co	identifi nnecte	ed above, d therewit	and to transact all h.	
Please change th	ne correspondence address	for the above-ider	tified a	pplication	to:	
	mentioned Customer Number					
OR						
Firm or	mo					
Individual Nar	IIIE					
Address						
City			State		Zip	
Country						
Telephone			Fax	<del></del>		
I am the:	dla anta:					
×× Applicant	vinventor.					
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
Statement under 37 CFR 3.73(b) is enclosed. (Form F10/3B/90).  SIGNATURE of Applicant or Assignee of Record						
		. 7/	011			
Name	Name Isaac B. Horton, III					
Signature						
Date November 09, 2001  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple						
NOTE: Signatures of all forms if more than one s	the inventors or assignees of reconsignature is required, see below*.	ord of the entire interes	t or their	representati	ve(s) are required. Submit multiple	
□ *Total of	forms are submitted.					